

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

sanofi-aventis U.S. Inc. Employees PAC

ADDRESS (number and street)

801 Pennsylvania Avenue - Ste 725

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20004

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00144345

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy Clark

Signature of Treasurer

Electronically Filed by Timothy Clark

Date

01

25

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
sanofi-aventis U.S. Inc. Employees PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2007	34710.13
(b) Cash on Hand at Beginning of Reporting Period .....	48136.67	
(c) Total Receipts (from Line 19) .....	29801.12	59707.66
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	77937.79	94417.79
7. Total Disbursements (from Line 31) .....	16215.00	32695.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	61722.79	61722.79
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

sanofi-aventis U.S. Inc. Employees PAC

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	20032.44	32682.05
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	9768.68	27025.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	29801.12	59707.66
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	29801.12	59707.66
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	29801.12	59707.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	29801.12	59707.66

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		65.00	145.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		65.00	145.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		16000.00	30400.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		150.00	2150.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		16215.00	32695.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		16215.00	32695.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	29801.12	59707.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29801.12	59707.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	65.00	145.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	65.00	145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ernest Baker

Mailing Address 5750 SW 132ND TERRACE

City

MIAMI

State

FL

Zip Code

33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878999

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Ernest Baker

Mailing Address 5750 SW 132ND TERRACE

City

MIAMI

State

FL

Zip Code

33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270782

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Ernest Baker

Mailing Address 5750 SW 132ND TERRACE

City

MIAMI

State

FL

Zip Code

33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340396

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ernest Baker

Mailing Address 5750 SW 132ND TERRACE

City

MIAMI

State

FL

Zip Code

33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440982

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Bergstrand

Mailing Address 3985 IRONWOOD DR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878909

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Stephen Bergstrand

Mailing Address 3985 IRONWOOD DR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270692

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Stephen Bergstrand

Mailing Address 3985 IRONWOOD DR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340306

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Bergstrand

Mailing Address 3985 IRONWOOD DR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440892

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Rachel Brock

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878991

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Rachel Brock

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270774

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Rachel Brock

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340388

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Rachel Brock

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440974

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176080

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239321

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386842

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551480

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790487

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790268

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824323

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878875

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270658

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340272

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Stacy Chick

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440858

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176459

Amount of Each Receipt this Period

27.29

**SUBTOTAL** of Receipts This Page (optional) .....

57.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.06

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176237

Amount of Each Receipt this Period

27.29

**B.**

Full Name (Last, First, Middle Initial)  
 Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239477

Amount of Each Receipt this Period

27.29

**C.**

Full Name (Last, First, Middle Initial)  
 Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.64

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386998

Amount of Each Receipt this Period

27.29

**SUBTOTAL** of Receipts This Page (optional) .....

81.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.93

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551636

Amount of Each Receipt this Period

27.29

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790643

Amount of Each Receipt this Period

27.29

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.51

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790424

Amount of Each Receipt this Period

27.29

**SUBTOTAL** of Receipts This Page (optional) .....

81.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824478

Amount of Each Receipt this Period

27.29

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

573.09

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879029

Amount of Each Receipt this Period

27.29

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.38

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270811

Amount of Each Receipt this Period

27.29

**SUBTOTAL** of Receipts This Page (optional) .....

81.87

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340425

Amount of Each Receipt this Period

27.29

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2441011

Amount of Each Receipt this Period

27.29

**C.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: A2007-1176458

Amount of Each Receipt this Period

42.18

SUBTOTAL of Receipts This Page (optional) .....

96.76

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176236

Amount of Each Receipt this Period

42.18

**B.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239476

Amount of Each Receipt this Period

42.18

**C.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

674.88

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386997

Amount of Each Receipt this Period

42.18

**SUBTOTAL** of Receipts This Page (optional) .....

126.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

717.06

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551635

Amount of Each Receipt this Period

42.18

**B.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790642

Amount of Each Receipt this Period

42.18

**C.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.42

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790423

Amount of Each Receipt this Period

42.18

**SUBTOTAL** of Receipts This Page (optional) .....

126.54

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	7

Transaction ID: A2007-1824477

Amount of Each Receipt this Period

42.18

**B.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: A2007-1879028

Amount of Each Receipt this Period

42.18

**C.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

927.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: A2007-2270810

Amount of Each Receipt this Period

42.18

SUBTOTAL of Receipts This Page (optional) .....

126.54

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.14

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340424

Amount of Each Receipt this Period

42.18

**B.**

Full Name (Last, First, Middle Initial)

Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1012.32

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441010

Amount of Each Receipt this Period

42.18

**C.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.18

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176468

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

126.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176246

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.18

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239486

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387007

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

127.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.18

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551645

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790653

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

804.18

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790434

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

127.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.68

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824488

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.18

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879039

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

931.68

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270821

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

127.50

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.18

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340435

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.68

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441021

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176283

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176062

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239303

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386824

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551462

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790469

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790250

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Judith W Cook

Mailing Address 6915 ANDOVER DR

City

ALEXANDRIA

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824305

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Copeland

Mailing Address 9444 OAK VILLAGE WAY

City

ELK GROVE

State

CA

Zip Code

95758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878843

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Copeland

Mailing Address 9444 OAK VILLAGE WAY

City

ELK GROVE

State

CA

Zip Code

95758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270627

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Susan Copeland

Mailing Address 9444 OAK VILLAGE WAY

City

ELK GROVE

State

CA

Zip Code

95758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340241

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Copeland

Mailing Address 9444 OAK VILLAGE WAY

City

ELK GROVE

State

CA

Zip Code

95758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440827

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Danowski

Mailing Address 10755 BLAZER DR

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878934

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Thomas Danowski

Mailing Address 10755 BLAZER DR

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270717

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Danowski

Mailing Address 10755 BLAZER DR

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340331

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Danowski

Mailing Address 10755 BLAZER DR

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440917

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176255

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176035

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239276

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386797

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551435

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790442

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790223

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824278

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878831

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270615

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340229

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Devaney

Mailing Address 4 WARREN LN

City

EDGEWATER PARK

State

NJ

Zip Code

08010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

US PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440815

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176461

Amount of Each Receipt this Period

53.41

**B.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176239

Amount of Each Receipt this Period

53.41

**C.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239479

Amount of Each Receipt this Period

53.41

**SUBTOTAL** of Receipts This Page (optional) .....

160.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387000

Amount of Each Receipt this Period

53.41

**B.**

Full Name (Last, First, Middle Initial)  
 Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

907.97

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551638

Amount of Each Receipt this Period

53.41

**C.**

Full Name (Last, First, Middle Initial)  
 Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790646

Amount of Each Receipt this Period

53.41

**SUBTOTAL** of Receipts This Page (optional) .....

160.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1014.79

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790427

Amount of Each Receipt this Period

53.41

**B.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.20

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824481

Amount of Each Receipt this Period

53.41

**C.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121.61

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879032

Amount of Each Receipt this Period

53.41

**SUBTOTAL** of Receipts This Page (optional) .....

160.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.02

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270814

Amount of Each Receipt this Period

53.41

**B.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1228.43

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340428

Amount of Each Receipt this Period

53.41

**C.**

Full Name (Last, First, Middle Initial)

Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1281.84

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441014

Amount of Each Receipt this Period

53.41

**SUBTOTAL** of Receipts This Page (optional) .....

160.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176205

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239445

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386966

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551604

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790611

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790392

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824447

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878998

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270781

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340395

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440981

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176348

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176127

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239367

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386888

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551526

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	7

Transaction ID: A2007-1790533

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	7

Transaction ID: A2007-1790314

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824369

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878920

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270703

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340317

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Eddie D Evans

Mailing Address 7931 HOLLINGTON PL

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440903

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Dan Flanders

Mailing Address 151 CHERRY OAK TRAIL

City

PETAL

State

MS

Zip Code

39465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879017

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Dan Flanders

Mailing Address 151 CHERRY OAK TRAIL

City

PETAL

State

MS

Zip Code

39465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270800

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dan Flanders

Mailing Address 151 CHERRY OAK TRAIL

City

PETAL

State

MS

Zip Code

39465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340414

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Dan Flanders

Mailing Address 151 CHERRY OAK TRAIL

City

PETAL

State

MS

Zip Code

39465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441000

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Frazier

Mailing Address 7331 ASHFORD GLEN DR

City

KNOXVILLE

State

TN

Zip Code

37918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878894

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Jennifer Frazier

Mailing Address 7331 ASHFORD GLEN DR

City

KNOXVILLE

State

TN

Zip Code

37918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270677

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Jennifer Frazier

Mailing Address 7331 ASHFORD GLEN DR

City

KNOXVILLE

State

TN

Zip Code

37918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340291

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Frazier

Mailing Address 7331 ASHFORD GLEN DR

City

KNOXVILLE

State

TN

Zip Code

37918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440877

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Michael H Gibbens

Mailing Address 4708 TORTUGA TRAIL

City

WICHITA FALLS

State

TX

Zip Code

76309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878841

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Michael H Gibbens

Mailing Address 4708 TORTUGA TRAIL

City

WICHITA FALLS

State

TX

Zip Code

76309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270625

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Michael H Gibbens

Mailing Address 4708 TORTUGA TRAIL

City

WICHITA FALLS

State

TX

Zip Code

76309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340239

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Michael H Gibbens

Mailing Address 4708 TORTUGA TRAIL

City

WICHITA FALLS

State

TX

Zip Code

76309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440825

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176455

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176233

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239473

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386994

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551632

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790639

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790420

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824474

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879025

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270807

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340421

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2441007

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: A2007-1176467

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional) .....

258.33

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176245

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239485

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1458.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387006

Amount of Each Receipt this Period

208.33

**SUBTOTAL** of Receipts This Page (optional) .....

624.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.64

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551644

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1874.97

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790652

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790433

Amount of Each Receipt this Period

208.33

**SUBTOTAL** of Receipts This Page (optional) .....

624.99

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.63

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824487

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.96

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879038

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2708.29

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270820

Amount of Each Receipt this Period

208.33

**SUBTOTAL** of Receipts This Page (optional) .....

624.99

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2916.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340434

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

VP of Government Relations

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

3124.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2441020

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Joseph Haggerty

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1745.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: A2007-1176469

Amount of Each Receipt this Period

135.85

SUBTOTAL of Receipts This Page (optional) .....

552.51

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Haggerty

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1881.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176247

Amount of Each Receipt this Period

135.85

**B.**

Full Name (Last, First, Middle Initial)

Joseph Haggerty

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2016.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239487

Amount of Each Receipt this Period

135.85

**C.**

Full Name (Last, First, Middle Initial)

Joseph Haggerty

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2152.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387008

Amount of Each Receipt this Period

135.85

**SUBTOTAL** of Receipts This Page (optional) .....

407.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176227

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239467

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386988

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

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federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551626

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790633

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790414

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	7

Transaction ID: A2007-1824468

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	7

Transaction ID: A2007-1879019

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	7

Transaction ID: A2007-2270802

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) .....

45.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340416

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City

MARIETTA

State

GA

Zip Code

30062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MGR GOV'T RELATIONS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441002

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Arthur Hill

Mailing Address 306 SPY GLASS HILL RD

City

BATH

State

PA

Zip Code

18014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.32

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440962

Amount of Each Receipt this Period

8.43

**SUBTOTAL** of Receipts This Page (optional) .....

38.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176415

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176193

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239433

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: A2007-1386954

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551592

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	7

Transaction ID: A2007-1790599

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790380

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824435

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878986

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270769

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340383

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440969

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. William Irish

Mailing Address 13727 MORNINGBLUFF DR

City

SAN ANTONIO

State

TX

Zip Code

37216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878880

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William Irish

Mailing Address 13727 MORNINGBLUFF DR

City

SAN ANTONIO

State

TX

Zip Code

37216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270663

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William Irish

Mailing Address 13727 MORNINGBLUFF DR

City

SAN ANTONIO

State

TX

Zip Code

37216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340277

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. William Irish

Mailing Address 13727 MORNINGBLUFF DR

City

SAN ANTONIO

State

TX

Zip Code

37216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440863

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: A2007-1176284

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	7

Transaction ID: A2007-1176063

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

60.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239304

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386825

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551463

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790470

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790251

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824306

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878858

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270642

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340256

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann E Isom

Mailing Address 16 WILLIAM WAY

City

LONG VALLEY

State

NJ

Zip Code

07853

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440842

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.02

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176457

Amount of Each Receipt this Period

54.54

**C.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

763.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176235

Amount of Each Receipt this Period

54.54

**SUBTOTAL** of Receipts This Page (optional) .....

134.08

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: A2007-1239475

Amount of Each Receipt this Period

54.54

**B.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: A2007-1386996

Amount of Each Receipt this Period

54.54

**C.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

927.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551634

Amount of Each Receipt this Period

54.54

SUBTOTAL of Receipts This Page (optional) .....

163.62

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790641

Amount of Each Receipt this Period

54.54

**B.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.26

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790422

Amount of Each Receipt this Period

54.54

**C.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824476

Amount of Each Receipt this Period

54.54

**SUBTOTAL** of Receipts This Page (optional) .....

163.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.34

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879027

Amount of Each Receipt this Period

54.54

**B.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270809

Amount of Each Receipt this Period

54.54

**C.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1254.42

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340423

Amount of Each Receipt this Period

54.54

**SUBTOTAL** of Receipts This Page (optional) .....

163.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jay Jennings

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1308.96

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441009

Amount of Each Receipt this Period

54.54

**B.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176052

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239293

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

84.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386814

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551452

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790459

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790240

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824295

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878848

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270632

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340246

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

David Johnson

Mailing Address P.O. BOX 6474

City

SANTA BARBARA

State

CA

Zip Code

93160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440832

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176370

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176148

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239388

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386909

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551547

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790554

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790335

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824390

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878941

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270724

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340338

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City

RIVERSIDE

State

CA

Zip Code

92503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440924

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176069

Amount of Each Receipt this Period

15.21

**B.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239310

Amount of Each Receipt this Period

15.21

**C.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386831

Amount of Each Receipt this Period

15.21

**SUBTOTAL** of Receipts This Page (optional) .....

45.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.57

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551469

Amount of Each Receipt this Period

15.21

**B.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790476

Amount of Each Receipt this Period

15.21

**C.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.99

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790257

Amount of Each Receipt this Period

15.21

**SUBTOTAL** of Receipts This Page (optional) .....

45.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.20

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824312

Amount of Each Receipt this Period

15.21

**B.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.41

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878864

Amount of Each Receipt this Period

15.21

**C.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.62

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270648

Amount of Each Receipt this Period

15.21

**SUBTOTAL** of Receipts This Page (optional) .....

45.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.83

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340262

Amount of Each Receipt this Period

15.21

**B.**

Full Name (Last, First, Middle Initial)

Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.04

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440848

Amount of Each Receipt this Period

15.21

**C.**

Full Name (Last, First, Middle Initial)

Ronald Krammer

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878951

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

40.42

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ronald Krammer

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: A2007-2270734

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Ronald Krammer

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340348

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Ronald Krammer

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440934

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790655

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790436

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824490

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
 Bridgewater NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879041

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
 Bridgewater NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270823

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
 Bridgewater NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340437

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441023

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Gail Lehmann

Mailing Address P.O. BOX 5415

City

SCOTTSDALE

State

AZ

Zip Code

85261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878908

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Gail Lehmann

Mailing Address P.O. BOX 5415

City

SCOTTSDALE

State

AZ

Zip Code

85261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270691

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ms. Gail Lehmann

Mailing Address P.O. BOX 5415

City

SCOTTSDALE

State

AZ

Zip Code

85261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340305

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Gail Lehmann

Mailing Address P.O. BOX 5415

City

SCOTTSDALE

State

AZ

Zip Code

85261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440891

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Douglas Ludeman

Mailing Address 4690 AVENUE DE LAS ESTRELLAS

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.01

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878989

Amount of Each Receipt this Period

9.81

**SUBTOTAL** of Receipts This Page (optional) .....

29.81

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Douglas Ludeman

Mailing Address 4690 AVENUE DE LAS ESTRELLAS

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.82

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270772

Amount of Each Receipt this Period

9.81

**B.**

Full Name (Last, First, Middle Initial)

Mr. Douglas Ludeman

Mailing Address 4690 AVENUE DE LAS ESTRELLAS

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.63

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340386

Amount of Each Receipt this Period

9.81

**C.**

Full Name (Last, First, Middle Initial)

Mr. Douglas Ludeman

Mailing Address 4690 AVENUE DE LAS ESTRELLAS

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.44

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440972

Amount of Each Receipt this Period

9.81

**SUBTOTAL** of Receipts This Page (optional) .....

29.43

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. David Markowitz

Mailing Address 9137 161ST LN

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: A2007-1878869

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David Markowitz

Mailing Address 9137 161ST LN

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: A2007-2270653

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David Markowitz

Mailing Address 9137 161ST LN

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340267

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. David Markowitz

Mailing Address 9137 161ST LN

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440853

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen C McCain

Mailing Address 5030 JOHNS CREEK CT

City

ALPHARETTA

State

GA

Zip Code

30202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878915

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Stephen C McCain

Mailing Address 5030 JOHNS CREEK CT

City

ALPHARETTA

State

GA

Zip Code

30202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270698

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Stephen C McCain

Mailing Address 5030 JOHNS CREEK CT

City

ALPHARETTA

State

GA

Zip Code

30202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340312

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen C McCain

Mailing Address 5030 JOHNS CREEK CT

City

ALPHARETTA

State

GA

Zip Code

30202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440898

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Dana McCormick

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878993

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Dana McCormick

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270776

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Dana McCormick

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340390

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Dana McCormick

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440976

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 99 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark McCoy

Mailing Address 1023 LEIGH ANN CT

City

JACKSON

State

MO

Zip Code

63755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878859

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mark McCoy

Mailing Address 1023 LEIGH ANN CT

City

JACKSON

State

MO

Zip Code

63755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270643

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mark McCoy

Mailing Address 1023 LEIGH ANN CT

City

JACKSON

State

MO

Zip Code

63755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340257

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark McCoy

Mailing Address 1023 LEIGH ANN CT

City

JACKSON

State

MO

Zip Code

63755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440843

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176392

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176170

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

52.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239410

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386931

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551569

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

63.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790576

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790357

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824412

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

63.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878963

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270746

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

D. Kirk Morgan

Mailing Address 58 ALPINE DR

City

LATHAM

State

NY

Zip Code

12110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340360

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

63.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 D. Kirk Morgan

Mailing Address 58 ALPINE DR

City State Zip Code  
 LATHAM NY 12110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440946

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)  
 Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1512.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176462

Amount of Each Receipt this Period

116.35

**C.**

Full Name (Last, First, Middle Initial)  
 Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1628.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176240

Amount of Each Receipt this Period

116.35

**SUBTOTAL** of Receipts This Page (optional) .....

253.70

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1745.25

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239480

Amount of Each Receipt this Period

116.35

**B.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1861.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387001

Amount of Each Receipt this Period

116.35

**C.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1977.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551639

Amount of Each Receipt this Period

116.35

**SUBTOTAL** of Receipts This Page (optional) .....

349.05

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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State

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Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2094.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	7

Transaction ID: A2007-1790647

Amount of Each Receipt this Period

116.35

**B.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2210.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	7

Transaction ID: A2007-1790428

Amount of Each Receipt this Period

116.35

**C.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2327.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	7

Transaction ID: A2007-1824482

Amount of Each Receipt this Period

116.35

SUBTOTAL of Receipts This Page (optional) .....

349.05

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

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City

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State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2443.35

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879033

Amount of Each Receipt this Period

116.35

**B.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2559.70

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270815

Amount of Each Receipt this Period

116.35

**C.**

Full Name (Last, First, Middle Initial)

Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2676.05

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340429

Amount of Each Receipt this Period

116.35

**SUBTOTAL** of Receipts This Page (optional) .....

349.05

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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sanofi-aventis U.S. Inc. Employees PAC

**A.**

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Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2792.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441015

Amount of Each Receipt this Period

116.35

**B.**

Full Name (Last, First, Middle Initial)

Karen L Okoniewski

Mailing Address 32 GRANGER PL

City

BUFFALO

State

NY

Zip Code

14222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878970

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Karen L Okoniewski

Mailing Address 32 GRANGER PL

City

BUFFALO

State

NY

Zip Code

14222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270753

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

136.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Karen L Okoniewski

Mailing Address 32 GRANGER PL

City

**BUFFALO**

State

**NY**

Zip Code

**14222**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

**FIELD SALES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**230.00**

Date of Receipt

**12 / 14 / 2007**

Transaction ID: A2007-2340367

Amount of Each Receipt this Period

**10.00**

**B.**

Full Name (Last, First, Middle Initial)

Karen L Okoniewski

Mailing Address 32 GRANGER PL

City

**BUFFALO**

State

**NY**

Zip Code

**14222**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

**FIELD SALES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**240.00**

Date of Receipt

**12 / 31 / 2007**

Transaction ID: A2007-2440953

Amount of Each Receipt this Period

**10.00**

**C.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

**BRIDGEWATER**

State

**NJ**

Zip Code

**08807**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

**EXECUTIVE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**236.21**

Date of Receipt

**07 / 13 / 2007**

Transaction ID: A2007-1176464

Amount of Each Receipt this Period

**18.17**

**SUBTOTAL** of Receipts This Page (optional) .....

**38.17**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.38

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176242

Amount of Each Receipt this Period

18.17

**B.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.55

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239482

Amount of Each Receipt this Period

18.17

**C.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.72

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387003

Amount of Each Receipt this Period

18.17

**SUBTOTAL** of Receipts This Page (optional) .....

54.51

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.89

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551641

Amount of Each Receipt this Period

18.17

**B.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.06

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790649

Amount of Each Receipt this Period

18.17

**C.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.23

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790430

Amount of Each Receipt this Period

18.17

**SUBTOTAL** of Receipts This Page (optional) .....

54.51

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City

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Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824484

Amount of Each Receipt this Period

18.17

**B.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.57

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879035

Amount of Each Receipt this Period

18.17

**C.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.74

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270817

Amount of Each Receipt this Period

18.17

**SUBTOTAL** of Receipts This Page (optional) .....

54.51

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Zip Code

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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.91

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340431

Amount of Each Receipt this Period

18.17

**B.**

Full Name (Last, First, Middle Initial)

Anne Oller

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441017

Amount of Each Receipt this Period

18.17

**C.**

Full Name (Last, First, Middle Initial)

Mr. Edward Overstreet

Mailing Address 1010 CUMBERLAND DR

City

EVANS

State

GA

Zip Code

30809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878896

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

46.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Edward Overstreet

Mailing Address 1010 CUMBERLAND DR

City

EVANS

State

GA

Zip Code

30809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270679

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Edward Overstreet

Mailing Address 1010 CUMBERLAND DR

City

EVANS

State

GA

Zip Code

30809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340293

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Edward Overstreet

Mailing Address 1010 CUMBERLAND DR

City

EVANS

State

GA

Zip Code

30809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440879

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Peterson

Mailing Address 719 N. LANCASHIRE LN  
BOX 682

City State Zip Code  
LIBERTY LAKE WA 99019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878854

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Peterson

Mailing Address 719 N. LANCASHIRE LN  
BOX 682

City State Zip Code  
LIBERTY LAKE WA 99019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270638

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Peterson

Mailing Address 719 N. LANCASHIRE LN  
BOX 682

City State Zip Code  
LIBERTY LAKE WA 99019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340252

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Peterson

Mailing Address 719 N. LANCASHIRE LN  
BOX 682City State Zip Code  
LIBERTY LAKE WA 99019FEC ID number of contributing  
federal political committee.**C**Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440838

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

James L Porter

Mailing Address 18920 ST. LAURENT DR

City State Zip Code  
LUTZ FL 33549FEC ID number of contributing  
federal political committee.**C**Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440902

Amount of Each Receipt this Period

8.50

**C.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807FEC ID number of contributing  
federal political committee.**C**Name of Employer  
sanofi-aventis U.S. Inc.Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: A2007-1176465

Amount of Each Receipt this Period

56.25

SUBTOTAL of Receipts This Page (optional) .....

74.75

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176243

Amount of Each Receipt this Period

56.25

**B.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239483

Amount of Each Receipt this Period

56.25

**C.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387004

Amount of Each Receipt this Period

56.25

**SUBTOTAL** of Receipts This Page (optional) .....

168.75

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551642

Amount of Each Receipt this Period

56.25

**B.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1012.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	7

Transaction ID: A2007-1790650

Amount of Each Receipt this Period

56.25

**C.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1068.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	7

Transaction ID: A2007-1790431

Amount of Each Receipt this Period

56.25

SUBTOTAL of Receipts This Page (optional) .....

168.75

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824485

Amount of Each Receipt this Period

56.25

**B.**

Full Name (Last, First, Middle Initial)  
 Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1181.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879036

Amount of Each Receipt this Period

56.25

**C.**

Full Name (Last, First, Middle Initial)  
 Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1237.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270818

Amount of Each Receipt this Period

56.25

**SUBTOTAL** of Receipts This Page (optional) .....

168.75

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1293.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340432

Amount of Each Receipt this Period

56.25

**B.**

Full Name (Last, First, Middle Initial)

Karen Preble

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2441018

Amount of Each Receipt this Period

56.25

**C.**

Full Name (Last, First, Middle Initial)

Lynn A Prothero

Mailing Address 18 VICTORIA DR

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: A2007-1879011

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

122.50

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Lynn A Prothero

Mailing Address 18 VICTORIA DR

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: A2007-2270794

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Lynn A Prothero

Mailing Address 18 VICTORIA DR

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340408

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Lynn A Prothero

Mailing Address 18 VICTORIA DR

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440994

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176229

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239469

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386990

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551628

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790635

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790416

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824470

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879021

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270804

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340418

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

D. Mark Richardson

Mailing Address 2200 MORNINGSIDE DR

City

JONESBORO

State

AR

Zip Code

72404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441004

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176278

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	7

Transaction ID: A2007-1176057

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: A2007-1239298

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: A2007-1386819

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

60.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

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C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551457

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	7

Transaction ID: A2007-1790464

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	7

Transaction ID: A2007-1790245

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

60.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824300

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878853

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270637

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340251

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City

TACOMA

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

PROF. SALES REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440837

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.25

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176282

Amount of Each Receipt this Period

55.25

**SUBTOTAL** of Receipts This Page (optional) .....

95.25

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	7

Transaction ID: A2007-1176061

Amount of Each Receipt this Period

55.25

**B.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

828.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: A2007-1239302

Amount of Each Receipt this Period

55.25

**C.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

884.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: A2007-1386823

Amount of Each Receipt this Period

55.25

SUBTOTAL of Receipts This Page (optional) .....

165.75

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

939.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551461

Amount of Each Receipt this Period

55.25

**B.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	7

Transaction ID: A2007-1790468

Amount of Each Receipt this Period

55.25

**C.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	7

Transaction ID: A2007-1790249

Amount of Each Receipt this Period

55.25

SUBTOTAL of Receipts This Page (optional) .....

165.75

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City State Zip Code  
 PITTSTOWN NJ 08867

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824304

Amount of Each Receipt this Period

55.25

**B.**

Full Name (Last, First, Middle Initial)  
 Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City State Zip Code  
 PITTSTOWN NJ 08867

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878857

Amount of Each Receipt this Period

55.25

**C.**

Full Name (Last, First, Middle Initial)  
 Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City State Zip Code  
 PITTSTOWN NJ 08867

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1215.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270641

Amount of Each Receipt this Period

55.25

**SUBTOTAL** of Receipts This Page (optional) .....

165.75

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340255

Amount of Each Receipt this Period

55.25

**B.**

Full Name (Last, First, Middle Initial)

Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City

PITTSTOWN

State

NJ

Zip Code

08867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

ADMIN SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1326.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440841

Amount of Each Receipt this Period

55.25

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael Shemali

Mailing Address 1907 W 43RD PLACE

City

KENNEWICK

State

WA

Zip Code

99337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: A2007-1878837

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

120.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael Shemali

Mailing Address 1907 W 43RD PLACE

City

KENNEWICK

State

WA

Zip Code

99337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270621

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael Shemali

Mailing Address 1907 W 43RD PLACE

City

KENNEWICK

State

WA

Zip Code

99337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340235

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael Shemali

Mailing Address 1907 W 43RD PLACE

City

KENNEWICK

State

WA

Zip Code

99337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440821

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Glenn Simmonds

Mailing Address 4011 E. 59TH LN

City

DAVENPORT

State

IA

Zip Code

52807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: A2007-1878866

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Glenn Simmonds

Mailing Address 4011 E. 59TH LN

City

DAVENPORT

State

IA

Zip Code

52807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: A2007-2270650

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Glenn Simmonds

Mailing Address 4011 E. 59TH LN

City

DAVENPORT

State

IA

Zip Code

52807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340264

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. Glenn Simmonds

Mailing Address 4011 E. 59TH LN

City

DAVENPORT

State

IA

Zip Code

52807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440850

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: A2007-1239488

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: A2007-1387009

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

50.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551646

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790654

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790435

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824489

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879040

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270822

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City State Zip Code  
 Bridgewater NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340436

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)  
 Melissa Smith

Mailing Address 300 Somerset Corporate Blvd

City State Zip Code  
 Bridgewater NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441022

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
 Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2058.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176466

Amount of Each Receipt this Period

208.33

**SUBTOTAL** of Receipts This Page (optional) .....

248.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2266.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176244

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2474.97

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239484

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2683.30

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387005

Amount of Each Receipt this Period

208.33

**SUBTOTAL** of Receipts This Page (optional) .....

624.99

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2891.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: A2007-1551643

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3099.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	7

Transaction ID: A2007-1790651

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3308.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: A2007-1790432

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional) .....

624.99

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3516.62

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824486

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3724.95

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879037

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3933.28

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270819

Amount of Each Receipt this Period

208.33

**SUBTOTAL** of Receipts This Page (optional) .....

624.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4141.61

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340433

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)

Jonathan Spear

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4349.94

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441019

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

Brent Stansbury

Mailing Address 18 LANCE RD

City

LEBANON

State

NJ

Zip Code

08833

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878938

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

426.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Brent Stansbury

Mailing Address 18 LANCE RD

City State Zip Code  
 LEBANON NJ 08833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270721

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)  
 Brent Stansbury

Mailing Address 18 LANCE RD

City State Zip Code  
 LEBANON NJ 08833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340335

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)  
 Brent Stansbury

Mailing Address 18 LANCE RD

City State Zip Code  
 LEBANON NJ 08833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440921

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Bruce R Steinberg

Mailing Address 11700 MANOR RD

City

LEAWOOD

State

KS

Zip Code

66211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878966

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Bruce R Steinberg

Mailing Address 11700 MANOR RD

City

LEAWOOD

State

KS

Zip Code

66211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270749

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Bruce R Steinberg

Mailing Address 11700 MANOR RD

City

LEAWOOD

State

KS

Zip Code

66211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340363

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Bruce R Steinberg

Mailing Address 11700 MANOR RD

City

LEAWOOD

State

KS

Zip Code

66211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440949

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Patrice M Sutherland

Mailing Address 15006 SEAHIRSE DR

City

HOUSTON

State

TX

Zip Code

77062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	7

Transaction ID: A2007-1878972

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Patrice M Sutherland

Mailing Address 15006 SEAHIRSE DR

City

HOUSTON

State

TX

Zip Code

77062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

Transaction ID: A2007-2270755

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Patrice M Sutherland

Mailing Address 15006 SEAHIRSE DR

City

HOUSTON

State

TX

Zip Code

77062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340369

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Patrice M Sutherland

Mailing Address 15006 SEAHIRSE DR

City

HOUSTON

State

TX

Zip Code

77062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

FIELD SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440955

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176293

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176072

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239313

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386834

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 sanofi-aventis U.S. Inc. Employees PAC

**A.**

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Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551472

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790479

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790260

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824315

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1878867

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270651

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: A2007-2340265

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: A2007-2440851

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	0	7

Transaction ID: A2007-1176463

Amount of Each Receipt this Period

46.87

SUBTOTAL of Receipts This Page (optional) .....

96.87

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

John Valenti

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City

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Zip Code

08807

FEC ID number of contributing  
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C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.18

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176241

Amount of Each Receipt this Period

46.87

**B.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.05

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239481

Amount of Each Receipt this Period

46.87

**C.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.92

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1387002

Amount of Each Receipt this Period

46.87

**SUBTOTAL** of Receipts This Page (optional) .....

140.61

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.79

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551640

Amount of Each Receipt this Period

46.87

**B.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790648

Amount of Each Receipt this Period

46.87

**C.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

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Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.53

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790429

Amount of Each Receipt this Period

46.87

**SUBTOTAL** of Receipts This Page (optional) .....

140.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 154 / 176

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Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824483

Amount of Each Receipt this Period

46.87

**B.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.27

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879034

Amount of Each Receipt this Period

46.87

**C.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1031.14

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270816

Amount of Each Receipt this Period

46.87

**SUBTOTAL** of Receipts This Page (optional) .....

140.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 155 / 176

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.01

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340430

Amount of Each Receipt this Period

46.87

**B.**

Full Name (Last, First, Middle Initial)

John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

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Zip Code

08807

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federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1124.88

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441016

Amount of Each Receipt this Period

46.87

**C.**

Full Name (Last, First, Middle Initial)

Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790644

Amount of Each Receipt this Period

40.12

**SUBTOTAL** of Receipts This Page (optional) .....

133.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
 Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790425

Amount of Each Receipt this Period

40.12

**B.**

Full Name (Last, First, Middle Initial)  
 Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.04

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824479

Amount of Each Receipt this Period

40.12

**C.**

Full Name (Last, First, Middle Initial)  
 Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
 BRIDGEWATER NJ 08807

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 sanofi-aventis U.S. Inc.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.16

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879030

Amount of Each Receipt this Period

40.12

**SUBTOTAL** of Receipts This Page (optional) .....

120.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 176  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

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Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.28

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270812

Amount of Each Receipt this Period

40.12

**B.**

Full Name (Last, First, Middle Initial)  
Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.40

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340426

Amount of Each Receipt this Period

40.12

**C.**

Full Name (Last, First, Middle Initial)  
Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441012

Amount of Each Receipt this Period

40.12

**SUBTOTAL** of Receipts This Page (optional) .....

120.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176460

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

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C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176238

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239478

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386999

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

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NJ

Zip Code

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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551637

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

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FEC ID number of contributing  
federal political committee.

C

Name of Employer  
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Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790645

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790426

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824480

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879031

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 161 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270813

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340427

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441013

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176456

Amount of Each Receipt this Period

81.38

**B.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1139.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176234

Amount of Each Receipt this Period

81.38

**C.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1220.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: A2007-1239474

Amount of Each Receipt this Period

81.38

**SUBTOTAL** of Receipts This Page (optional) .....

244.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

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City

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08807

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C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1302.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 7

Transaction ID: A2007-1386995

Amount of Each Receipt this Period

81.38

**B.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

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Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1383.46

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: A2007-1551633

Amount of Each Receipt this Period

81.38

**C.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1464.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790640

Amount of Each Receipt this Period

81.38

**SUBTOTAL** of Receipts This Page (optional) .....

244.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

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08807

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C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1546.22

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790421

Amount of Each Receipt this Period

81.38

**B.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1627.60

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824475

Amount of Each Receipt this Period

81.38

**C.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1708.98

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879026

Amount of Each Receipt this Period

81.38

**SUBTOTAL** of Receipts This Page (optional) .....

244.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1790.36

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270808

Amount of Each Receipt this Period

81.38

**B.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1871.74

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340422

Amount of Each Receipt this Period

81.38

**C.**

Full Name (Last, First, Middle Initial)

Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1953.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2441008

Amount of Each Receipt this Period

81.38

**SUBTOTAL** of Receipts This Page (optional) .....

244.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Hancock William

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879004

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Hancock William

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270787

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Hancock William

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340401

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Hancock William

Mailing Address 300 Somerset Corporate Blvd.

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: A2007-2440987

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.63

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: A2007-1176473

Amount of Each Receipt this Period

70.21

**C.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 7

Transaction ID: A2007-1176251

Amount of Each Receipt this Period

70.21

**SUBTOTAL** of Receipts This Page (optional) .....

150.42

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

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**A.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	7

Transaction ID: A2007-1239491

Amount of Each Receipt this Period

70.21

**B.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: A2007-1387012

Amount of Each Receipt this Period

70.21

**C.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: A2007-1551649

Amount of Each Receipt this Period

70.21

SUBTOTAL of Receipts This Page (optional) .....

210.63

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 176

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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**A.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 7

Transaction ID: A2007-1790657

Amount of Each Receipt this Period

70.21

**B.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.89

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: A2007-1790438

Amount of Each Receipt this Period

70.21

**C.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.10

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: A2007-1824492

Amount of Each Receipt this Period

70.21

**SUBTOTAL** of Receipts This Page (optional) .....

210.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 176

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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**A.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.31

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Transaction ID: A2007-1879043

Amount of Each Receipt this Period

70.21

**B.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: A2007-2270825

Amount of Each Receipt this Period

70.21

**C.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.73

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Transaction ID: A2007-2340439

Amount of Each Receipt this Period

70.21

**SUBTOTAL** of Receipts This Page (optional) .....

210.63

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 176

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sanofi-aventis U.S. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	7	

Transaction ID: A2007-2441025

Amount of Each Receipt this Period

70.21

SUBTOTAL of Receipts This Page (optional) .....

70.21

TOTAL This Period (last page this line number only) .....

20032.44

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 172 / 176

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens for Harkin Mailing Address P O Box 811	<b>Transaction ID:</b> B181279 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 7</div> </div>
City Des Moines State IA Zip Code 50304 Purpose of Disbursement Contribution Candidate Name Tom Harkin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:	<b>Amount of Each Disbursement this Period</b> <div>2000.00</div> <div>011</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Congressman Joe Barton Cmte Mailing Address P.O. Box 1444 City Ennis State TX Zip Code 75120 Purpose of Disbursement Contribution Candidate Name Joe Barton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 06	<b>Transaction ID:</b> B175274 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 0 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div> <div>011</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Rush Holt for Congress Mailing Address P.O. Box 782 City Pennington State NJ Zip Code 08534 Purpose of Disbursement Contribution Candidate Name Rush D Holt Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 12	<b>Transaction ID:</b> B194856 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 0 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <div>011</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 176

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lautenberg for Senate	<b>Transaction ID:</b> B195176 <b>Date of Disbursement</b>
Mailing Address Gateway One 23rd Floor	<div> <div>09</div> <div>25</div> <div>2007</div> </div>
City Newark State NJ Zip Code 07102	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>2500.00</div>
Candidate Name Frank R Lautenberg	<div>011</div> Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Pallone for Congress	<b>Transaction ID:</b> B184043 <b>Date of Disbursement</b>
Mailing Address P.O. Box 3176	<div> <div>09</div> <div>26</div> <div>2007</div> </div>
City Long Branch State NJ Zip Code 07740	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>2500.00</div>
Candidate Name Frank Pallone, Jr.	<div>011</div> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Hulshof for Congress	<b>Transaction ID:</b> B197508 <b>Date of Disbursement</b>
Mailing Address P.O. Box 1621	<div> <div>10</div> <div>17</div> <div>2007</div> </div>
City Columbia State MO Zip Code 65010	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Kenny C Hulshof	<div>011</div> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 174 / 176

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)

Lindsey Graham for Senate

Mailing Address P.O. Box 1155

City State Zip Code  
Seneca SC 29679

Purpose of Disbursement  
Contribution

Candidate Name  
Lindsey O Graham

**011**  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: SC District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: B203064**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Steve Rothman for Congress

Mailing Address P.O. Box 714

City State Zip Code  
Hackensack NJ 07602

Purpose of Disbursement  
Contribution

Candidate Name  
Steven R Rothman

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 09

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: B203328**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

16000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 176

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b> Full Name (Last, First, Middle Initial) NJ Senate Democratic Majority	<b>Transaction ID:</b> B180688 <b>Date of Disbursement</b>
Mailing Address 194-196 West State Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 7</div> </div>
City State Zip Code Trenton NJ 08608	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement O-2007 State Party Cmte NJ	<div>500.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	
<b>B.</b> Full Name (Last, First, Middle Initial) Cmte to Elect Mike Veon	<b>Transaction ID:</b> B153986 <b>Date of Disbursement</b>
Mailing Address P.O. Box 327	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 7</div> </div>
City State Zip Code Beaver Falls PA 15010	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement G-2006 State House 14 PA	<div>-500.00</div>
Candidate Name Mike R. Veon	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Void - orig reported on 10/31/06
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Jim Raussen	<b>Transaction ID:</b> B182902 <b>Date of Disbursement</b>
Mailing Address 661 Park Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 7</div> </div>
City State Zip Code Cincinnati OH 45246	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement P-2008 State House 28 OH	<div>150.00</div>
Candidate Name Jim Raussen	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

**SUBTOTAL** of Disbursements This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

150.00

Form/Schedule: **SA11AI**

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.